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APPLICANTS

Robin A. Reeder, El Segundo, CA;

 David M. Filgas, Newbury Park, CA;
 Robert W. Byren, Manhattan Beach, CA;
** CONTINUING DATA ***** *NA* ******* FOREIGN APPLICATIONS ***** *NA* *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY CA	SHEETS DRAWING 3	TOTAL CLAIMS 46	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature <i>[Signature]</i>	Initials <i>[Initials]</i>		

ADDRESS

 John E. Gunther
 Raytheon Company
 P.O. Box 902 (E1/E150)
 El Segundo, CA
 90245-0902

TITLE

Slab laser and method with improved and directionally homogenized beam quality

FILING FEE RECEIVED 1410	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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